### Exhibit A

PAGE 01

Sī	TATEMENT OF SMALL CLAIM AND NOTICE OF TRIAL	For Court DOCKET NO. S.C. 634/	2010	Trial Court of Massachusett Small Claims Session	s 🏚
PART	BOSTON MUNICIPAL	Cambridge		☐ HOUSING COURT	
	COURT PLANTIFE'S NAME, ADDRESS, ZIP COOE AND PH		PLAINTIPE'S ATTOR		livision
	Bradley Opportuning		Name;		
	1545 Harvard Yard	Mail Center	Address:		
PART 2					
٠,	Cambridge, MA 02		***************************************		
	PHONE NO. (410) 802-888		PHONE NO:	BBO NO:	
	United States Postal S	ervile	Name:		
	Affin: Katherice E Lighton, Pin 125 Mt Aulury Stra	et master of Combridge		9582400000A/1A/1059AL D.AT	4 20.0
PART 3			Address:	9582A000006/16/1010 SURC	10.0
	Cambridge, MA 021		-157		
	PHINENO: (617) 876 - 388		PHONE NO:	And the second s	· A Million
	PLAINTIFF'S CLAIM. The defendant owes \$ 40.75 plus \$ 30.00 court costs for the following reasons:  Give the date of the event that is the basis of your claim.				
On December 21, 2009. I mailed a package through the Mt. Adam St. branch of USPS and purchased \$900 of 1752.  USPS failed to deliver the package, but only paid \$505.4					
					***************************************
					<u> </u>
	the \$900 insurance yaims USPS over an additional \$394.57				
for the inquid amont of the insurance, \$ 12.36 for the					_
	<b>,</b>				
	postage, \$ 3.65 to	mailings of the	supporting 1	materials for the insuran	<u></u>
	Elain, and \$30.00	in court cost	s for	a good total of 944	0.78
					**************************************
	- Brand	000		( / / / / / /	
	SIGNATURE OF PLAINTIFF X  MEDIATION: Mediation of this claim me	av be available prior to tria	lif both parties an	DATE 6/16/10	7
PART 5	the or she desires mediation; the defendant may consent to mediation on the trial date.  The plaintiff is willing to attempt to settle this claim through court mediation.				
MILITARY AFFIDAVIT: The plaintiff states under the pains and penalties of perjury that the:					
PART	above defendant(s) is (are) not set the military and at present live(s) of	ving in		ove defendant(s) is (are) serving in	
	at the above address.	A MOIK(8)		e military	11/ /
			X	TURE OF PLAINTIFF	[6]10 DATE
AL	NOTICE TO DEFENDANT:		NAMEANDA	PORES OF COURT	14
=	You are being sued in Small Clair ramed plaintiff, You are directed to	appear for trial of this	4040 1	TYSTIC VALLEY PARKWAY PLAINT	THE S
NOTICE OF TRIAL	claim on the date and time noted to	the right.	MEDFOR	D, NA 02155	HE E
2	If you wish to settle this claim be	fore the trial date, you		306-2/30 MUS	T.   =
<u>ō</u>	should contact the plaintiff or the p	iaintiff's attorney.	DATE AND TH	ME OF TRIAL THIS CO	URT C
	EE ADDITIONAL INSTRUCTIONS ON		AUGUST	5, 2010 8:45A.M. DATE A	IND Q
HST.	Roanne Sragow CLERKMAG	STRATE OR DESIGNEE	DAI		
INSTRUCTIONS FOR FILING A SMALL CLAIM — You must complete Parts 1-6 of this form. See instructions on reverse					
	THE PARTY OF THE P	— Tou must cor	iipiele Parts 1-6	or this form. See instructions on r	everse

Claim Correspondence

# Customer Inquiry and Claims Response System

Page 1 of 2

### FIELD SITE

## Search for Inquiry

## Search for Claim

Article Search

Check Number Search Case Number Search Customer Search

## Correspondence Details

RESTRICTED INFORMATION

Article #: VI521557566US Preferences | TAGs | Loggist | Apput

Description: Deficient - Proof of value required

Date sent: 03/01/2010 Sent by: PSACBC

Recipient: BRADLEY OPPENHEIMER 474 CURRIER MAIL CTR

CAMBRIDGE, MA 02138-7542 **64 LINNAEAN STREET** 

30 days: the information noted below, along with a copy of this letter to this address within

Letter. This letter is in response to the insurance claim referenced above. Please submit

PO BOX 80143 USPS DOMESTIC CLAIMS

Evidence of insurance - Provide one of the following: ST. LOUIS, MO 63180-0143

\_The original postmarked receipt for Insured Mail, Registered Mail, or COD

insurance.) insurance amount. (The Express Mail label may also be used as evidence of The original sales receipt from the USPS showing the article number and

Also

Internet payment transaction. Evidence of value - Provide a dated sales receipt, invoice, or proof of completed

If we do not receive this information within 30 days, your claim will be denied

For more information about claims, visit your local Post Office or our Web site at http://www.usps.com/insuranceclaims/

The United States Postal Service values your business. We apologize for any

FIELD SITE

Claim Search Result Details

# Customer Inquiry and Claims Response System

Page 1 of 1

RESTRICTED INFORMATION

Preferences FAIDS Logout About

## Claim Details

Article #: VI521557566US

Search for Claim

Article Search

Case Number Search Customer Search

Search for Inquiry

**BRADLEY OPPENHEIMER** Mailer Information

**64 LINNAEAN STREET** 

Check Number Search

CAMBRIDGE, MA 02138-7542

BOPPENHEIMER@GMAIL.COM

**474 CURRIER MAIL CTR** 

3 CHARING CT JOEL OPPENHEIMER **OWINGS MILLS, MD 21117-1296** Addressee Information

### Claim Originator: Section A Information -Mailer

3.BLADE RUNNER COLLECTOR'S SWEATSHIRT SOFTWARE LICENSE (LEFT RECEIPT -4.NEUROMANCER (PAPERBACK **EDITION DVD** 2.GRAY HARVARD UNIVERSITY BAND 08/08/09). INCL. TAX: TOTAL = \$987.88 **INSTALLED MS OFFICE 2007** 1. LAPTOP COMPUTER, WITH Merchandise: Signed Date: Amount Claimed Payment Assignment. Mailer \$1,041.34 01/23/2010

Section B Information

Mail Date. Claim Reason: Article not delivered Service Type: Numbered Insured 12/21/2009

Fee: \$10,70

Postage: Claim Date: Entry Method: 01/23/2010 \$12.36

Internet Application

## Status Information

CICRS: First Appeal Delivery: ACCEPT OR PICKUP Online None

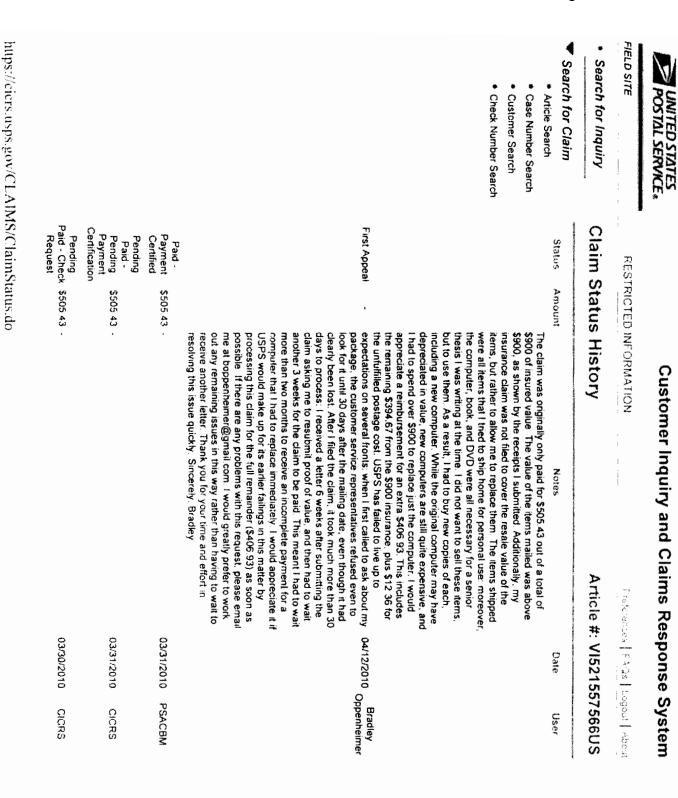
Supplemental Information

Correspondence Deficient - Proof of value

Check Number 00306926556 required

I would like to

Take desired action 60.





Delivery Event History

▼ Search for Claim Search for Inquiry

Article Search

 Case Number Search \* Check Number Search Customer Search

< Back

# **Customer Inquiry and Claims Response System**

RESTRICTED INFORMATION

**Delivery Event History** 

Article #: VI521557566US

Preferences | FALS | Cognil | Additi

Days Left To Check Delivery Status: 20 Last PTS Request. 01/26/2010 Event Code ACCEPT OR PICKUP Description 12/21/2009 PTS Date Event Zip 02138 CCRS Date 01/27/2010